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ATTORNEY DOCKET NO. 230809

CLIENT REF. NO. E-152-2002/0-US-03

U.S. APPLICATION NO. Unassigned

10/510652

**TRANSMITTAL LETTER TO THE UNITED STATES  
DESIGNATED/ELECTED OFFICE (DO/EO/US)  
CONCERNING A FILING UNDER 35 USC 371 AND 37 CFR 1.491**

INTERNATIONAL APPLICATION NO.  
PCT/US03/10932

INTERNATIONAL FILING DATE  
9 April 2003 (09.04.03)

PRIORITY DATE CLAIMED  
9 April 2002 (09.04.02)

TITLE OF INVENTION QUANTITATIVE ASSAY OF THE ANGIOGENIC AND ANTIANGIOGENIC ACTIVITY OF A TEST MOLECULE

APPLICANT(S) FOR DO/EO/US Libutti et al.

Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:


1. ☒ This is a **FIRST** submission of items concerning a filing under 35 USC 371 and 37 CFR 1.491.
2. ☐ This is a **SECOND** or **SUBSEQUENT** submission of items concerning a filing under 35 USC 371 and 37 CFR 1.491.
3. ☒ This is an express request to begin national examination procedures (35 USC 371(f)).
4. ☒ The US has been elected by the expiration of 19 months from the priority date (PCT Article 31).
5. ☒ A copy of the International Application as filed (35 USC 371(c)(2))
  - a. ☐ is attached hereto (required only if not communicated by the International Bureau).
  - b. ☐ has been communicated by the International Bureau.
  - c. ☒ is not required, as the application was filed in the United States Receiving Office (RO/US).
6. ☐ An English language translation of the International Application as filed (35 USC 371(c)(2)).
7. ☐ Amendments to the claims of the International Application under PCT Article 19 (35 USC 371(c)(3))
  - a. ☐ are attached hereto (required only if not communicated by the International Bureau).
  - b. ☐ have been communicated by the International Bureau.
  - c. ☐ have not been made; however, the time limit for making such amendments has NOT expired.
  - d. ☐ have not been made and will not be made.
8. ☐ An English language translation of the amendments to the claims under PCT Article 19 (35 USC 371(c)(3)).
9. ☐ An oath or declaration of the inventor(s) (35 USC 371(c)(4)).
10. ☐ An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 USC 371(c)(5)).
11. Nucleotide and/or Amino Acid Sequence Submission
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ Paper Copy
  - c. ☐ Statement verifying identity of above copies

**Items 12 to 19 below concern other document(s) or information included:**

12. ☒ An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
  - ☒ Form PTO-1449
  - ☒ Copies of References (except for U.S. patents and applications)
13. ☐ An assignment for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
14. ☒ A **FIRST** preliminary amendment.
  - ☐ A **SECOND** or **SUBSEQUENT** preliminary amendment.
15. ☐ A substitute specification.
16. ☐ A change of power of attorney and/or address letter.
17. ☒ Application Data Sheet Under 37 CFR 1.76
18. ☒ Return Receipt Postcard
19. ☒ Other items or information: International Search Report for PCT/US03/10932

| U.S. APPLICATION NO.<br>10/510,652   |              | INTERNATIONAL APPLICATION NO.<br>PCT/US03/10932 |      | ATTORNEY DOCKET NO.<br>230809 |    | CLIENT REF. NO.<br>E-152-2002/0-US-03 |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
|--|--------------|---|------|-------------------------------|----|---------------------------------------|--------------|--------------|------|--|--|--------------|----|------|---|------------|----|--------------------|---|-------|---|------------|----|--|--|--|--|------------|----|--|--|--|--|
| 20. The following fees are submitted:<br><input type="checkbox"/> <b>Basic National Fee (37 CFR 1.492(a)(1)-(5)):</b><br>Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO ..... \$1,080.00<br>International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO ..... \$920.00<br>International preliminary examination fee (37 CFR 1.482) not paid to USPTO, but international search fee (37 CFR 1.445(a)(2)) paid to USPTO ..... \$770.00<br>International preliminary examination fee paid to USPTO (37 CFR 1.482) but all claims did not satisfy provisions of PCT Article 33(1)-(4) ..... \$730.00<br>International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(1) to (4) ..... \$100.00<br><b>ENTER APPROPRIATE BASIC FEE AMOUNT=</b> |              |   |      |                               |    | CALCULATIONS                          |              | PTO USE ONLY |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
|  |              |   |      |                               |    |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <input type="checkbox"/> <b>Claim Fee</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:20%;">CLAIMS</th> <th style="width:20%;">NUMBER FILED</th> <th style="width:20%;">NUMBER EXTRA</th> <th style="width:20%;">RATE</th> <th style="width:20%;"></th> <th style="width:20%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>25</td> <td>-20=</td> <td>5</td> <td>x \$ 18.00</td> <td>\$</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>- 3 =</td> <td>2</td> <td>x \$ 86.00</td> <td>\$</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Multiple Dependent Claim(s) (if applicable)</td> <td>+ \$290.00</td> <td>\$</td> </tr> </tbody> </table>  |              |   |      |                               |    | CLAIMS                                | NUMBER FILED | NUMBER EXTRA | RATE |  |  | Total Claims | 25 | -20= | 5 | x \$ 18.00 | \$ | Independent Claims | 2 | - 3 = | 2 | x \$ 86.00 | \$ | <input type="checkbox"/> Multiple Dependent Claim(s) (if applicable) |  |  |  | + \$290.00 | \$ |  |  |  |  |
| CLAIMS   | NUMBER FILED | NUMBER EXTRA                                    | RATE |                               |    |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| Total Claims   | 25           | -20=  | 5    | x \$ 18.00                    | \$ |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| Independent Claims   | 2            | - 3 =   | 2    | x \$ 86.00                    | \$ |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <input type="checkbox"/> Multiple Dependent Claim(s) (if applicable)   |              |   |      | + \$290.00                    | \$ |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <input checked="" type="checkbox"/> <b>Surcharge of \$130.00 for furnishing the National fee or oath or declaration later than <input type="checkbox"/> 20 <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date</b>   |              |   |      |                               |    | \$130.00                              |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <b>TOTAL OF ABOVE CALCULATIONS=</b>  |              |   |      |                               |    | \$130.00                              |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.   |              |   |      |                               |    | \$( )                                 |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <b>SUBTOTAL=</b>   |              |   |      |                               |    | \$130.00                              |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <input type="checkbox"/> Processing fee of \$130.00 for furnishing English Translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date.  |              |   |      |                               |    | \$                                    |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <b>TOTAL NATIONAL FEE=</b>   |              |   |      |                               |    | \$                                    |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <input type="checkbox"/> Fee for recording the enclosed assignment. The assignment must be accompanied by an appropriate cover sheet. \$40.00 per property   |              |   |      |                               |    | +                                     |              | \$           |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <b>TOTAL FEE=</b>  |              |   |      |                               |    | \$130.00                              |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
|  |              |   |      |                               |    | Amount to be refunded                 |              | \$           |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
|  |              |   |      |                               |    | charged:                              |              | \$           |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| a. <input type="checkbox"/> No fee is believed to be due.<br>b. <input checked="" type="checkbox"/> Please charge Deposit Account No. 12-1216 the total fee indicated above.<br>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 12-1216. A duplicate copy of this sheet is enclosed.  |              |   |      |                               |    |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| <b>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</b>   |              |   |      |                               |    |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |
| SEND ALL CORRESPONDENCE TO CUSTOMER NO. 45733:<br><br><div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center; font-size: 1.2em;">45733</p> </div> <div style="width: 50%; text-align: right;"> <p>David J. Schodin, Registration No. 41,294<br/>                     Leydig, Voit &amp; Mayer, Ltd.<br/>                     Two Prudential Plaza, Suite 4900<br/>                     180 North Stetson Avenue<br/>                     Chicago, Illinois 60601-6780<br/>                     (312) 616-5600 (telephone)<br/>                     (312) 616-5700 (facsimile)<br/>                     Date: October 28, 2004</p> </div> </div>   |              |   |      |                               |    |                                       |              |              |      |  |  |              |    |      |   |            |    |                    |   |       |   |            |    |  |  |  |  |            |    |  |  |  |  |

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|  |              |   |      |  |           |                                       |              |
|--|--------------|---|------|--|-----------|---------------------------------------|--------------|
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| <b>TOTAL OF ABOVE CALCULATIONS=</b>  |              |   |      |  |           | \$820.00                              |              |
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| <b>SUBTOTAL=</b>   |              |   |      |  |           | \$820.00                              |              |
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| 45733  |              |   |      | <br>David J. Schodin, Registration No. 41,294<br>Leydig, Voit & Mayer, Ltd.<br>Two Prudential Plaza, Suite 4900<br>180 North Stetson Avenue<br>Chicago, Illinois 60601-6780<br>(312) 616-5600 (telephone)<br>(312) 616-5700 (facsimile)<br>Date: October 8, 2004 |           |                                       |              |

|                                    |   |                               |                                       |
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|------------------------------------|---|-------------------------------|---------------------------------------|

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## CERTIFICATION UNDER 37 CFR 1.10

"Express Mail" Label Number: EV335717038US

Date of Deposit: October 8, 2004

I hereby certify that this express request to begin national examination procedures under 35 USC 371(f) of the International Patent Application referenced above, including all of the items listed thereon as enclosures, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

David J. Schodin

Printed Name of Person Signing:

Signature

